Case 16-32647 Doc 1 Filed 10/13/16 Entered 10/13/16 11:07:27 Desc Main Document Page 1 of 66

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on	Jeanette		
	your government-issued picture identification (for example, your driver's license or passport).	First name	First name	
		Middle name	Middle name	
	Bring your picture	Phipps		
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years	Jeanette Johnson		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7883		

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Case number (if known)

Debtor 1 **Jeanette Phipps**

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 18811 Royal Rd Homewood, IL 60430 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 **Jeanette Phipps**

⊃ar	t 2: Tell the Court About	Your Ba	nkruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are		Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	■ Ch	apter 7					
		☐ Ch	apter 11					
		☐ Ch	apter 12					
		☐ Ch	apter 13					
3.	How you will pay the fee		about how yo	ou may pay. Typ attorney is subi	pically, if you are paying the fee yo	k with the clerk's office in your local court for more detaurself, you may pay with cash, cashier's check, or moralf, your attorney may pay with a credit card or check w	ney	
					tallments. If you choose this options (Official Form 103A).	on, sign and attach the Application for Individuals to Pa	y	
			I request that but is not req	nt my fee be wa uired to, waive y	nived (You may request this option your fee, and may do so only if your	n only if you are filing for Chapter 7. By law, a judge ma ur income is less than 150% of the official poverty line n installments). If you choose this option, you must fill c	that	
						ial Form 103B) and file it with your petition.		
9.	Have you filed for bankruptcy within the last 8 years?	■ No.						
	iast o years?	☐ Yes	s. District		When	Case number		
			District		When	Case number Case number		
			District		When	Case number		
			Diotriot					
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an	☐ Yes	S.					
	affiliate?		Debtor			Relationship to you		
			District	-	When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ No.	Go to I	ine 12.				
		☐ Yes	s. Has yo	our landlord obta	ained an eviction judgment agains	t you and do you want to stay in your residence?		
				No. Go to line	12.			
				Yes. Fill out <i>In</i> bankruptcy per		Judgment Against You (Form 101A) and file it with this		

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Document Debtor 1 **Jeanette Phipps** Case number (if known)

Par	Report About Any Bu	sinesses	You Owr	n as a Sole Propriet	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of bus	iness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, Stat	e & ZIP Code
	it to this petition.		Chec	k the appropriate bo	x to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))
				None of the above	•
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline	s. If you ir is, cash-f i.C. 1116	ndicate that you are allow statement, and for (1)(B).	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	No.	I am ı	not filing under Chap	ter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention
	Do you own or have any	■ No.	· razar a	out i roporty of his	, report, marriedae illinoalate / illentiell
	property that poses or is alleged to pose a threat of imminent and	Yes.	What is	the hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	
					Number, Street, City, State & Zip Code

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Debtor 1 Jeanette Phipps

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

> I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document Page 6 of 66 Case number (if known) Debtor 1 Jeanette Phipps Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jeanette Phipps Signature of Debtor 2 Jeanette Phipps Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on October 13, 2016

MM / DD / YYYY

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Debtor 1 Jeanette Phipps Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Joseph	R. Doyle	Date	October 13, 2016	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Joseph R.	Doyle			
Printed name				
Bizar & Do	yle, LLC			
Firm name				
123 West I	Madison Street			
Suite 205				
Chicago, II	L 60602			
Number, Street,	City, State & ZIP Code			
Contact phone	312-427-3100	Email address	joe@bizardoylelaw.com	
6279065				
Bar number & St	ate			

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Debtor 1 Jeanette Phipps Case number (if known)				if known)				
Pari	6: Answer These Questi	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumindividual primarily for a personal,	ner debts? Consumer debts are define family, or household purpose."	d in 11 U.S.C. § 101(8) as "incurred by an			
			□ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.		ss debts? Business debts are debts that or through the operation of the business				
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe th	at are not consumer debts or business	debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.				
Do you estimate that after any exempt property is excluded an		Yes.		u estimate that after any exempt proper e to distribute to unsecured creditors?	ty is excluded and administrative expenses			
	administrative expenses are paid that funds will		■ No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	1-49		□ 1,000-5,000	1 25,001-50,000			
	you estimate that you owe?	□ 50-99)	□ 5001-10,000	☐ 50,001-100,000			
		☐ 100-1 ☐ 200-9		□ 10,001-25,000	☐ More than100,000			
19.	How much do you	□ \$0 - \$	\$50.000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		001 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion			
			,001 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		□ \$500	,001 - \$1 million	Щ ф100,000,001 - ф300 IIIIII0II	- Wore train \$50 billion			
20.	How much do you	□ \$0 - \$		□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion			
			,001 - \$500,000 ,001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
			,001 - \$1 HMIOH					
Par	t 7: Sign Below							
For	you	I have e	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
			If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					an attorney to help me fill out this			
		i reques	t relief in accordance with the chapt	er of title 11, United States Code, speci	fied in this petition.			
		I unders bankrup and 357	tand making a false statement, conc tcy case can result in fines up to \$2	cealing property, or obtaining money or 50,000, or imprisonment for up to 20 ye	property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,			
			te Phipps fe of Debtor 1	Signature of Debtor	2			
		Execute	nolon lanu	Executed on MM /	DD / YYYY			

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Jebtor 1 Jeanette Phipps		Case number (if known)			
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petition under Chapter 7, 11, 12, or 13 of title 11, United St	ates Code, and have e	explained the relief available under each chapter		
If you are not represented by	for which the person is eligible. I also certify that I and, in a case in which § 707(b)(4)(D) applies, cer				
an attorney, you do not need	schedules filed with the petition is incorrect.	ury that i have no know	neage after arringuity that the information in the		
to file this page.	\mathcal{L}				
	7 / 1//	Date	September 16, 2016		
	Signature of Attorney for Debtor		MM / DD / YYYY		
	Joseph R. Doyle				
	Printed name				
	Bizar & Doyle, LLC				
	Firm name				
	123 West Madison Street				
	Suite 205				
	Chicago, IL 60602				
	Number, Street, City, State & ZIP Code				
	Contact phone 312-427-3100	Email address	joe@bizardoylelaw.com		
	6279065				
	Bar number & State				

Fill in this informa	ition to identify your c	ase:				
Debtor 1	Jeanette Phipps					
Dahan 0	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	ruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS			
Case number (if known)					☐ Check if this is an amended filing	
Official Form Declaration		n Individua	ıl Debtor's So	hedules	12/15	
You must file this f obtaining money o years, or both. 18 t	f two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below					
Did you pay	or agree to pay some	one who is NOT an att	orney to help you fill out I	pankruptcy forms?		
■ No						
Yes. Na	me of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)	
	y of perjury, I declare true and correct.	that I have read the su	ımmary and schedules file	ed with this declaration	n and	
Jeanette Signature	Phipps of Debtor 1		Signature of	Debtor 2		
Date	08/30/201	b	Date			

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Debtor 1 Jeanette Phipps	Case number (# known)
Part 12: Sign Below	
ere true and correct. I understand that make with a bankruptcy case can result in fines unter U.S.C. 86 152, 1341, 1519, and 3571.	of Pinancial Affairs and any attachments, and i declars under penalty of perjury that the enswers ng a false statement, concealing property, or obtaining money or property by fraud in connection p to \$250,000, or imprisonment for up to 20 years, or both. Signature of Debtor 2
Jenette Phipps Sipnature of Debtor 1 Date September 6, 2016	Dete
Did you attach additional pages to Your Sta No Yes	tement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No	s not an attorney to help you fill out bankruptoy forms?

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Samuellan dat t		Case number (If known)	
seouring debt:	<u> </u>	V 900 da. 112	
Creditor's Td Auto Finance	☐ Surrender the property	and redeem it.	No
Description of 2016 Kis Sportage 500 Value based on NADA securing debt:	Retain the property and	ement.	Yes
List Your Unexpired Personal Pro any unexpired personal property lease he information below. Do not ilst real est may assume an unexpired personal pro	that you listed in Schedule G: Executor		(Official Form 106G), eriod has not yet ende
scribe your unexpired personal property			lease be assumed?
sor's name: scription of leased		□ No	
perty:		□ Yas	
sor's name: scription of leased perty:		□ No	
seor's name:		☐ Yes	
scription of leased perty:		□ No	
scor's name: scription of leased		□ No	
perty:		☐ Yes	
SQr's name: scription of leased		□ No	
perty:		□ Үөв	
sor's name: cription of leased		□ No	
perty:		☐ Yes	
sor's name: Cription of leased	· · · · · · · · · · · · · · · · · · ·	□ No	
perty:		☐ Yes	
Sign Below			

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		Docume	nt Page 13 of 66	
Fill in this inforr	mation to identify your	case:		
Debtor 1	Jeanette Phipps			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
(if known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	257,726.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	37,496.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	295,222.00
Pai	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	312,573.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	3,500.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	74,190.00
	Your total liabilities	\$	390,263.00
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	8,044.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	8,554.00
Paı	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Page 14 of 66 Case number (if known) Debtor 1 Jeanette Phipps

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	١
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	ŀ

9,621.16

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	3,500.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	3,500.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	7,000.00

	Case 10	0-32047	DOC 1	_	:nwent	Page 15 of 6		11.07.2	./ Des	SC IV	
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ebto		· tamo	····aa.·	0.140		2001.100					
		Name	Middle	e Name		Last Name					
nite	d States Bankruptc	y Court for t	he: NORTHER	RN DIST	RICT OF ILLIN	NOIS					
ase	number					_					Check if this is amended filing
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ντι :	-:-I	00 A /D									
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Do y □ N ■ Y	lo. Go to Part 2.	r legal or equ	itable interest in a	any resid	lence, building,	land, or similar prope	erty?	he amount of	any secure	d claim	is on <i>Śchedule l</i>
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Do y N Y	lo. Go to Part 2. Yes. Where is the pro 18811 Royal Rd Street address, if available Homewood City	perty? e, or other descr	itable interest in a	What	t is the property Single-family h Duplex or mult Condominium Manufactured Land Investment pro Timeshare Other has an interest Debtor 1 only	land, or similar property? Check all that apply nome ti-unit building or cooperative or mobile home	Erty?	Current value entire proper \$151 Describe the such as fee a life estate),	e of the ety? ,847.00 nature of y simple, tens if known.	d claim ms Sec Curr port	is on Schedule Is rured by Propert rent value of th ion you own? \$151,847 vnership intere
Do y N Y	lo. Go to Part 2. Yes. Where is the pro 18811 Royal Rd Street address, if available Homewood Sity	perty? e, or other descr	itable interest in a	What	t is the property Single-family h Duplex or mult Condominium Manufactured Land Investment pro Timeshare Other has an interest Debtor 1 only Debtor 2 only	land, or similar property? Check all that apply nome ti-unit building or cooperative or mobile home operty	Erty?	Current value entire proper \$151 Describe the such as fee a life estate), Fee Simple	e of the ty? ,847.00 nature of y simple, tensif known.	Curr port	rent value of the ion you own? \$151,847 whereship interesty the entireties
Do y N Y	lo. Go to Part 2. Yes. Where is the pro 18811 Royal Rd Street address, if available Homewood City	perty? e, or other descr	itable interest in a	What	t is the property Single-family h Duplex or mult Condominium Manufactured Land Investment pro Timeshare Other has an interest Debtor 1 only Debtor 2 only At least one of	land, or similar property? Check all that apply nome ti-unit building or cooperative or mobile home	erty?	Current value entire proper \$151 Describe the such as fee a life estate), Fee Simple	e of the ty? ,847.00 nature of y simple, tend if known. e this is compations)	Curr port	rent value of the ion you own? \$151,847 whereship interesty the entireties

Official Form 106A/B Schedule A/B: Property page 1

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Case number (if known) Document Debtor 1 Jeanette Phipps If you own or have more than one, list here: 1.2 What is the property? Check all that apply 18004 Chantily Lane Single-family home Do not deduct secured claims or exemptions. Put Street address, if available, or other description the amount of any secured claims on Schedule D: Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Condominium or cooperative Manufactured or mobile home П Current value of the Current value of the **Hazel Crest** IL 60429-0000 □ Land entire property? portion you own? \$105,879.00 \$105,879.00 Investment property City State ZIP Code Timeshare Describe the nature of your ownership interest □ Other (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one Fee simple Debtor 1 only Cook Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for \$257,726.00 pages you have attached for Part 1. Write that number here..... Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put **Buick** 3 1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Lacrosse Creditors Who Have Claims Secured by Property. Model: Debtor 1 only Year: 2011 Debtor 2 only Current value of the Current value of the 48.000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another

☐ Check if this is community property

☐ At least one of the debtors and another

☐ Check if this is community property

Who has an interest in the property? Check one

(see instructions)

Debtor 1 only

Debtor 2 only

(see instructions)

Debtor 1 and Debtor 2 only

200,000

Official Form 106A/B Schedule A/B: Property page 2

Value based on NADA

Ford

1997

Value based on NADA

Approximate mileage:

Other information:

Escort

3.2 Make:

Model:

Year:

\$10,975.00

\$300.00

Current value of the

portion you own?

\$10,975.00

\$300.00

Current value of the

entire property?

Do not deduct secured claims or exemptions. Put

the amount of any secured claims on Schedule D:

Creditors Who Have Claims Secured by Property.

Case 10		Document Page 17 of 66		SC Main
Debtor 1 Jeanette F	Phipps		se number (if known)	
3.3 Make: Kia		Who has an interest in the property? Check one	the amount of any secure	laims or exemptions. Put ed claims on Schedule D:
Model: Sporta	ge	Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.
Year: 2016		Debtor 2 only	Current value of the	Current value of the
Approximate mileage	e: 3,500	Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other information:		At least one of the debtors and another		
Value based on	NADA	_	\$4E 47E 00	\$45.475.00
		Check if this is community property (see instructions)	\$15,175.00	\$15,175.00
		nd other recreational vehicles, other vehicles, and attercraft, fishing vessels, snowmobiles, motorcycle at		
		rn for all of your entries from Part 2, including an that number here		\$26,450.00
Part 3: Describe Your Pe				
Do you own or have an	y legal or equitable in	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
 Household goods an Examples: Major appl □ No ■ Yes. Describe 	iances, furniture, linens	used household goods		\$1,250.00
	Miscellaneous	usea nousenoia goods		φ1,230.00
	Windows/Doors	s - Lien held by Service Finance Company		\$500.00
	s and radios; audio, vid cell phones, cameras, n	eo, stereo, and digital equipment; computers, printer nedia players, games	s, scanners; music collect	ions; electronic devices
	Miscellaneous	electronics		\$300.00
	moonanoous			
	and figurines; paintings, ections, memorabilia, co	prints, or other artwork; books, pictures, or other art illectibles	objects; stamp, coin, or ba	aseball card collections;
	841	haaka tanaa CDI		64E0.00
	Wiscellaneous	books, tapes, CD's, etc.		\$150.00
musical in	otographic, exercise, ar	nd other hobby equipment; bicycles, pool tables, golf	clubs, skis; canoes and ka	ayaks; carpentry tools;
Yes. Describe				
	Treadmill			\$50.00
				7.5.00

Official Form 106A/B

Schedule A/B: Property

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Case number (if known) Document Jeanette Phipps Debtor 1 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$500.00 Personal used clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... Miscellaneous costume jewelry \$200.00 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,950.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... **Chase Bank** \$318.00 17.1. Checking Chase Bank \$40.00 Savings 17.2. **Checking account with Chase** \$2,180,00 17.3. Custodial Account \$215.00 Chase Bank **Custodial Account**

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Case number (if known) Document

Debtor 1 **Jeanette Phipps**

	17.5	5. Checking	Fifth Third Bank	\$43.00
18	. Bonds, mutual funds, or pub Examples: Bond funds, investi		kerage firms, money market accounts	
	■ No □ Yes	Institution or issuer r		
19	 Non-publicly traded stock an joint venture 	d interests in incorpo	orated and unincorporated businesses, including an interest in an LLC, pa	artnership, and
	☐ Yes. Give specific information	on about themlame of entity:	 % of ownership:	
20	Negotiable instruments include	e personal checks, casl	tiable and non-negotiable instruments hiers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them.	
	☐ Yes. Give specific informatio	n about them ssuer name:		
21	□ No	RISA, Keogh, 401(k), 40	03(b), thrift savings accounts, or other pension or profit-sharing plans	
	Yes. List each account separate Type	rately. e of account:	Institution name:	
	401	(k)	401(k) through employer - 100% exempt	\$5,000.00
			that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual:	
		ntal deposit	Fifth Third	\$300.00
_	1/61	itai ueposit	Thu thiu	φ300.00
23	. Annuities (A contract for a per	iodic payment of mone	y to you, either for life or for a number of years)	
		ame and description.		
24	. Interests in an education IRA 26 U.S.C. §§ 530(b)(1), 529A(b ■ No		ualified ABLE program, or under a qualified state tuition program.	
		n name and description	. Separately file the records of any interests.11 U.S.C. § 521(c):	
25	. Trusts, equitable or future in ■ No	terests in property (of	ther than anything listed in line 1), and rights or powers exercisable for yo	our benefit
	☐ Yes. Give specific information	on about them		
26	 Patents, copyrights, tradema Examples: Internet domain na No 		d other intellectual property ds from royalties and licensing agreements	
	☐ Yes. Give specific information	on about them		
27	 Licenses, franchises, and otl Examples: Building permits, examples: 		s erative association holdings, liquor licenses, professional licenses	
	Yes. Give specific information	on about them		

Money or property owed to you?

page 5

Debtor 1	Case 16-32647 Jeanette Phipps	Doc 1	Filed 10/13/16 Document	Entered 10/13/16 11:07:27 Page 20 of 66 Case number (if known)	Desc Main
					portion you own? Do not deduct secured claims or exemptions.
■ No	runds owed to you Give specific information a	bout them, incl	luding whether you alre	ady filed the returns and the tax years	
■ No	support les: Past due or lump sum Give specific information		sal support, child suppo	ort, maintenance, divorce settlement, propert	y settlement
Examp ■ No	amounts someone owes poles: Unpaid wages, disabil benefits; unpaid loans Give specific information	ity insurance p s you made to s		efits, sick pay, vacation pay, workers' compe	ensation, Social Security
	ts in insurance policies of les: Health, disability, or lif	e insurance; h	ealth savings account (l	HSA); credit, homeowner's, or renter's insura	nce
■ Yes.	Name the insurance comp Com	any of each po npany name:	licy and list its value.	Beneficiary:	Surrender or refund value:
		ployer - Terr h surrender	n Life Insurance - n value	o Spouse	\$0.00
If you a someo	terest in property that is a care the beneficiary of a living the has died. Give specific information	ng trust, expect		d surance policy, or are currently entitled to rec	ceive property because
Examp ■ No	against third parties, wholes: Accidents, employment	nt disputes, ins		t or made a demand for payment to sue	
■ No	contingent and unliquidat		every nature, including	g counterclaims of the debtor and rights t	o set off claims
■ No	ancial assets you did no				
36. Add t	he dollar value of all of y	our entries fro		ny entries for pages you have attached	\$8,096.00

Official Form 106A/B Schedule A/B: Property page 6

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

■ No. Go to Part 6.□ Yes. Go to line 38.

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Case number (if known) Document Debtor 1 Jeanette Phipps Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: Part 1: Total real estate, line 2 \$257,726.00 Part 2: Total vehicles, line 5 \$26,450.00 57. Part 3: Total personal and household items, line 15 \$2,950.00 Part 4: Total financial assets, line 36 \$8,096.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 \$0.00 61. Total personal property. Add lines 56 through 61... \$37,496.00 Copy personal property total \$37,496.00

Official Form 106A/B Schedule A/B: Property page 7

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$295,222.00

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Fill in this infor	mation to identify your	case:		
Debtor 1	Jeanette Phipps			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exem	ptions are	you claiming?	Check one only	, even if	your spouse is	filing with	vou.
----	-------------------	------------	---------------	----------------	-----------	----------------	-------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
18811 Royal Rd Homewood, IL 60430 Cook County	\$151,847.00		\$30,000.00	735 ILCS 5/12-901
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
18004 Chantily Lane Hazel Crest, IL 60429 Cook County	\$105,879.00		\$0.00	735 ILCS 5/12-901
Line from Schedule A/B: 1.2			100% of fair market value, up to any applicable statutory limit	
1997 Ford Escort 200,000 miles Value based on NADA	\$300.00		\$2,400.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
2016 Kia Sportage 3,500 miles Value based on NADA	\$15,175.00		\$0.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 3.3			100% of fair market value, up to any applicable statutory limit	
Miscellaneous used household goods	\$1,250.00		\$704.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	

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Case number (if known) Debtor 1 Jeanette Phipps Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Windows/Doors - Lien held by 735 ILCS 5/12-1001(b) \$500.00 \$0.00 **Service Finance Company** П Line from Schedule A/B: 6.2 100% of fair market value, up to any applicable statutory limit Miscellaneous electronics 735 ILCS 5/12-1001(b) \$300.00 \$300.00 Line from Schedule A/B: 7.1 100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001(a) Miscellaneous books, tapes, CD's, \$150.00 \$150.00 etc. Line from Schedule A/B: 8.1 100% of fair market value, up to any applicable statutory limit Treadmill 20 ILCS 1805/10 \$50.00 \$50.00 Line from Schedule A/B: 9.1 100% of fair market value, up to any applicable statutory limit Personal used clothing 735 ILCS 5/12-1001(a) \$500.00 \$500.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Miscellaneous costume jewelry 735 ILCS 5/12-1001(b) \$200.00 \$200.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001(b) Checking: Chase Bank \$318.00 \$318.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Savings: Chase Bank 735 ILCS 5/12-1001(b) \$40.00 \$40.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit **Custodial Account: Checking** 735 ILCS 5/12-1001(b) \$2,180.00 \$2,180,00 account with Chase Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit **Custodial Account: Chase Bank** 735 ILCS 5/12-1001(b) \$215.00 \$215.00 Line from Schedule A/B: 17.4 100% of fair market value, up to any applicable statutory limit Checking: Fifth Third Bank 735 ILCS 5/12-1001(b) \$43.00 \$43.00 Line from Schedule A/B: 17.5 100% of fair market value, up to any applicable statutory limit 401(k): 401(k) through employer -735 ILCS 5/12-704 100% \$5,000.00 100% exempt Line from Schedule A/B: 21.1 П 100% of fair market value, up to any applicable statutory limit

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Debtor 1 Jeanette Phipps

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

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Fill in this informat	ion to identify you	ır case:				
Debtor 1	Jeanette Phipps					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankro	untey Court for the	NORTHERN DISTRICT OF ILLI	NOIS			
Officed States Darkin	upicy Court for the.	NORTHER BOTH OF THE	14010			
Case number						
(if known)					☐ Check	if this is an
					ameno	led filing
000 1 1 5						
Official Form 1	106D					
Schedule D	: Creditors	Who Have Claims S	Secured	by Propert	У	12/15
		If two married people are filing togethe out, number the entries, and attach it to				
number (if known).		,			pg, ,	
1. Do any creditors hav	ve claims secured by	y your property?				
□ No. Check thi	is box and submit tl	his form to the court with your other s	schedules. Yo	ou have nothing else t	o report on this form.	
Vec Fill in all	of the information	helow		· ·	·	
		below.				
Part 1: List All S	ecured Claims			Column A	Column B	Column C
		more than one secured claim, list the cred				
		s a particular claim, list the other creditors cal order according to the creditor's name		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
		oar oracl according to the product of hame	•	value of collateral.	claim	If any
2.1 Chase Mtg		Describe the property that secures the		\$154,586.00	\$151,847.00	\$2,739.00
Creditor's Name		18811 Royal Rd Homewood,	IL			
		60430 Cook County				
Do Poy 2460	16	As of the date you file, the claim is: C	heck all that			
Po Box 2469 Columbus, C	-	apply.				
		☐ Contingent				
Number, Street, City	y, State & Zip Code	Unliquidated				
Who owes the debt?	Check one	☐ Disputed Nature of lien. Check all that apply.				
_	Official offic.	☐ An agreement you made (such as m	ortanan or ann	urad		
Debtor 1 only		car loan)	lortgage or sec	uieu		
☐ Debtor 2 only	0 1	Пол. т. / т				
Debtor 1 and Debto	•	☐ Statutory lien (such as tax lien, mech	nanic's lien)			
☐ At least one of the c☐ Check if this claim		☐ Judgment lien from a lawsuit	Mortgage			
community debt	relates to a	Other (including a right to offset)	Wiortgage			
,,						
	Opened					
	6/27/07					
Date debt was incurre	Last Active 7/06/16	Last 4 digits of account number	er 7703			
Date dept was incurre	7/00/10	East 4 digits of account number				
				4400 704 00	A405.070.00	40.005.00
2.2 Pnc Mortgag Creditor's Name	je	Describe the property that secures the		\$109,784.00	\$105,879.00	\$3,905.00
Oreditor 3 Name		18004 Chantily Lane Hazel Co 60429 Cook County	rest, IL			
		60429 COOK County				
Po Box 8703	1	As of the date you file, the claim is: C	heck all that			
Dayton, OH		apply. Contingent				
Number, Street, City		☐ Unliquidated				
rumbor, onder, on	y, claic a 2.p ccac	☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as m	ortgage or sec	cured		
Debtor 2 only		car loan)	5 5. 7. 250			
Debtor 1 and Debto	ır 2 only	☐ Statutory lien (such as tax lien, mech	hanic's lien\			
At least one of the c		☐ Judgment lien from a lawsuit				
,		- 20gooo a lattouit				

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Debtor 1 Jeanette Phipps	Case number (if know)				
First Name Middle N	ame Last Name				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	ehicle			
Opened 12/07 Last Active 7/06/16	Last 4 digits of account number 6142	<u> </u>			
2.3 Santander Consumer Usa	Describe the property that secures the claim:	\$21,916.00	\$10,975.00	\$10,941.00	
Creditor's Name	2011 Buick Lacrosse 48,000 miles Value based on NADA				
Po Box 961245 Ft Worth, TX 76161	As of the date you file, the claim is: Check all that apply. Contingent				
Number, Street, City, State & Zip Code Who owes the debt? Check one.	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.				
Debtor 1 only Debtor 2 only	☐ An agreement you made (such as mortgage or s car loan)	ecured			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	ehicle			
Opened 03/15 Last Active					
Date debt was incurred 4/25/16	Last 4 digits of account number	<u> </u>			
Service Finance Company	Describe the property that secures the claim:	\$2,988.00	\$500.00	\$2,488.00	
Creditor's Name	Windows/Doors - Lien held by Service Finance Company				
PO Box 645387 Cincinnati, OH 45264	As of the date you file, the claim is: Check all that apply. Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the debt? Check one. Debtor 1 only	Nature of lien. Check all that apply. An agreement you made (such as mortgage or s car loan)	ecured			
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	•	Money Security			
Date debt was incurred 2016	Last 4 digits of account number 7883	<u> </u>			
2.5 Td Auto Finance	Describe the property that secures the claim:	\$23,299.00	\$15,175.00	\$8,124.00	
Creditor's Name	2016 Kia Sportage 3,500 miles Value based on NADA				
Po Box 9223 Farmington Hills, MI 48333	As of the date you file, the claim is: Check all that apply. Contingent				
Number, Street, City, State & Zip Code Who owes the debt? Check one	☐ Unliquidated ☐ Disputed Nature of liep. Check all that apply				

Official Form 106D

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Debtor 1 Jeanette F	Phipps		Case number (if know)		
First Name	Middle Na	me Last Name			
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 □ At least one of the debt □ Check if this claim recommunity debt	otors and another	☐ An agreement you made (such as car loan) ☐ Statutory lien (such as tax lien, me ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
Date debt was incurred	Opened 05/16 Last Active 6/30/16	Last 4 digits of account num	nber <u>6856</u>		
	of your form, add t	olumn A on this page. Write that nun he dollar value totals from all pages	, , , , , , , , , , , , , , , , , , ,		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Fill in this inform	nation to identify your	case:					
Debtor 1	Jeanette Phipps						
	First Name	Middle Name	Last Nam	Э			
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Nam	Э			
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS				
Case number							
(if known)						☐ Check	if this is an
						_	led filing
O(() :	400E/E						
Official Form							40/45
		ho Have Unsecue Part 1 for creditors with Pl					12/15
Schedule G: Execut Schedule D: Credito left. Attach the Con- name and case nun	tory Contracts and Unexp ors Who Have Claims Sec tinuation Page to this pag	that could result in a claim. ired Leases (Official Form 10 ured by Property. If more sp. e. If you have no information secured Claims	16G). Do not inclu ace is needed, co	ide any cre py the Par	editors with partially s t you need, fill it out, i	ecured claims that a number the entries in	re listed in nthe boxes on the
	ors have priority unsecure						
□ No. Go to P		g ,					
Yes.							
identify what typ possible, list the Part 1. If more t	be of claim it is. If a claim hat e claims in alphabetical ordet than one creditor holds a pa	s. If a creditor has more than o as both priority and nonpriority er according to the creditor's na rticular claim, list the other cre see the instructions for this forn	amounts, list that on the ame. If you have meditors in Part 3.	claim here a lore than tw	and show both priority a	nd nonpriority amount	ts. As much as
2.1 IL Depa	rtment of Revenue*	Last 4 digits of	account number	7883	\$3,500.00	\$3,500.00	\$0.00
PO BOX		When was the d	lebt incurred?	2014		<u> </u>	-
	treet City State Zlp Code	As of the date v	ou file, the claim	is: Check a	all that apply		
	the debt? Check one.	☐ Contingent	,				
Debtor 1 o	inly	☐ Unliquidated					
Debtor 2 o	,	☐ Disputed					
_	and Debtor 2 only	· ·	TY unsecured cla	im:			
	•						
_	e of the debtors and anothe	<u>_</u>	ertain other debts v	41			
	his claim is for a commur subject to offset?	_			government ou were intoxicated		
■ No	subject to onset?	☐ Other. Specif		ary write yo	ou were intoxicated		
☐ Yes		□ Other. Speci	Taxes				
	I of Your NONPRIORIT						
•		cured claims against you?					
☐ No. You hav	ve nothing to report in this p	art. Submit this form to the cou	irt with your other	schedules.			
Yes.							
unsecured clain	n, list the creditor separately	aims in the alphabetical order for each claim. For each claim st the other creditors in Part 3.	n listed, identify wl	nat type of o	claim it is. Do not list cla	aims already included	in Part 1. If more

Official Form 106 E/F

Total claim

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Debtor 1 Jeanette Phipps Case number (if know) 4.1 **Barclays Bank Delaware** Last 4 digits of account number 8074 \$4,112.00 Nonpriority Creditor's Name Opened 02/09 Last Active Po Box 8803 When was the debt incurred? 6/20/16 Wilmington, DE 19899 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.2 Cap1/mnrds Last 4 digits of account number 2368 \$1,351.00 Nonpriority Creditor's Name Opened 07/07 Last Active 26525 N Riverwoods Blvd When was the debt incurred? 4/28/16 Mettawa, IL 60045 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.3 Capital One Bank Usa N Last 4 digits of account number 5616 \$3.680.00 Nonpriority Creditor's Name Opened 11/15 Last Active 15000 Capital One Dr When was the debt incurred? 6/14/16 Richmond, VA 23238 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

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■ No

☐ Yes

Other. Specify Consultants

Debts to pension or profit-sharing plans, and other similar debts

Collection Attorney Radiology Imaging

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Debtor 1 Jeanette Phipps Case number (if know) 4.7 \$1,496.00 **Discover Fin Svcs Llc** Last 4 digits of account number 1576 Nonpriority Creditor's Name Opened 09/14 Last Active Pob 15316 When was the debt incurred? 7/04/16 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.8 Franciscan Alliance 3688 Last 4 digits of account number \$556.00 Nonpriority Creditor's Name 28044 Network Place When was the debt incurred? 16 Chicago, IL 60673-1280 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify 4.9 H.E.L.P 7883 \$10.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 6408 When was the debt incurred? 2014 Plymouth, MI 48170-6408 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection ☐ Yes

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Case number (if know)

	- Case Harriser (II know)	
Last 4 digits of account number	7451	\$3,527.00
When was the debt incurred?	Opened 05/16	
As of the date you file, the claim	is: Check all that apply	
☐ Contingent		
☐ Unliquidated		
□ Disputed		
Type of NONPRIORITY unsecured	d claim:	
☐ Student loans		
Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
Debts to pension or profit-sharing	g plans, and other similar debts	
Other. Specify Collection	Attorney II Dept Of Human Svcs	
Last 4 digits of account number	3316	\$483.00
When was the debt incurred?	16	
As of the date you file, the claim i	is: Check all that apply	
As of the date you me, the dam's	S. Offect all that apply	
Contingent		
•	d claim:	
☐ Student loans		
Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
Debts to pension or profit-sharing	g plans, and other similar debts	
■ Other. Specify Center	Account for Sulivan Urgent Aid	
Last 4 digits of account number	7883	\$50,000.00
When was the debt incurred?	2010	
As of the date you file, the claim i	is: Check all that apply	
☐ Contingent		
☐ Unliquidated		
☐ Disputed		
Type of NONPRIORITY unsecured	d claim:	
☐ Student loans		
☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
Debts to pension or profit-sharing	g plans, and other similar debts	
■ Other. Specify Overpayme	ent of Public Aid	
	When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Debts to pension or profit-sharin Other. Specify Collection Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Contingent Contingent Student loans Obligations arising out of a separeport as priority claims Collection Center Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Obligations arising out of a separeport as priority claims Obligations arising out of a separeport as priority claims Obligations arising out of a separeport as priority claims Obligations or profit-sharing Debts to pension or profit-sharing	When was the debt incurred? Opened 05/16 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Collection Attorney II Dept Of Human Svcs Last 4 digits of account number When was the debt incurred? 16 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Collection Account for Sulivan Urgent Aid Center Last 4 digits of account number As of the date you file, the claim is: Check all that apply Last 4 digits of account number Other. Specify Collection Account for Sulivan Urgent Aid Center Last 4 digits of account number Other. Specify Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts

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Case number (if know) Debtor 1 Jeanette Phipps 4.1 Lake Anesthesia Associates J004 \$754.00 Last 4 digits of account number 3 Nonpriority Creditor's Name PO Box 158 When was the debt incurred? 16 Flossmoor, IL 60422-2077 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical 4.1 Mohela/dept Of Ed 0001 \$3,500.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 02/16 Last Active 633 Spirit Dr When was the debt incurred? 7/31/16 Chesterfield, MO 63005 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other, Specify Educational 4.1 Mrsi 8423 \$310.00 Last 4 digits of account number Nonpriority Creditor's Name 2250 E Devon When was the debt incurred? **Opened 10/15** Des Plaines, IL 60018 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Ingalls Memorial**

☐ Yes

Hospital

Other. Specify

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Debtor 1 Jeanette Phipps Case number (if know) 4.1 **Performance Foot and Ankle Center** 7570 \$121.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 401 East 162nd St, Ste 101 When was the debt incurred? 16 South Holland, IL 60473-2237 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical 4.1 Radiology Imaging Consultants CORI \$205.00 Last 4 digits of account number Nonpriority Creditor's Name 75 Remittance Dr Dept 1254 When was the debt incurred? 15 Chicago, IL 60675 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical 4.1 S Suburban Gastroenterology 1000 \$43.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 17901 Governors Hwy When was the debt incurred? 15 Suite 106 Homewood, IL 60430-1146 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Medical

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Debtor 1 Jeanette Phipps Case number (if know) 4.1 Sameh Nabelsi MD 0001 \$9.00 Last 4 digits of account number 9 Nonpriority Creditor's Name 19624 Governors Hwy, Suite 9 When was the debt incurred? 16 Flossmoor, IL 60422-2077 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical 4.2 Sanath Kimar MD 7883 \$366.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 9445 144th PI When was the debt incurred? 15 Orland Park, IL 60462-2543 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical ☐ Yes 4.2 Smart EOB- Humana 2533 \$44.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 14611 When was the debt incurred? 14 Lexington, KY 40512-4611 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify

Medical

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Page 36 of 66 Case number (if know) Debtor 1 Jeanette Phipps 4.2 **State Collection Service** 6738 \$0.00 Last 4 digits of account number 2 Nonpriority Creditor's Name 2509 S Stoughton Rd When was the debt incurred? 16 Madison, WI 53716 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Notice Only The University of Chicago 4.2 1354 \$238.00 3 **Physician** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 16 Group PO Box 75307 Chicago, IL 60675 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify 4.2 **Trustmark Recovery Services** 2816 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 541 Otis Bowen Dr When was the debt incurred? 15 Munster, IN 46321 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Notice

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1 Jeanette Phipps		Case number (if know)							
University of Chicago Medicene	Last 4 digits of account number	7883	\$156.00						
Nonpriority Creditor's Name 15965 Collections Center Drive Chicago, IL 60693	When was the debt incurred?	2016							
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply							
Who incurred the debt? Check one.									
■ Debtor 1 only	☐ Contingent	☐ Contingent							
☐ Debtor 2 only	☐ Unliquidated	☐ Unliquidated							
☐ Debtor 1 and Debtor 2 only	☐ Disputed								
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:							
☐ Check if this claim is for a community	☐ Student loans								
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not							
■ No	Debts to pension or profit-sharing	g plans, and other similar debts							
□Yes	Other. Specify Medical								
US Acute Care Solutions	Last 4 digits of account number	6385	\$18.00						
Nonpriority Creditor's Name									
PO Box 14099	When was the debt incurred?	16							
Belfast, ME 04915 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply							
Who incurred the debt? Check one.		on one and apply							
■ Debtor 1 only	☐ Contingent								
Debtor 2 only	☐ Unliquidated								
☐ Debtor 1 and Debtor 2 only	Disputed								
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:							
☐ Check if this claim is for a community	☐ Student loans								
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not							
■ No	Debts to pension or profit-sharing	g plans, and other similar debts							
Yes	Other. Specify Medical								
Vision Financial Corp	Last 4 digits of account number	4011	\$311.00						
Nonpriority Creditor's Name			4011100						
PO Box 460260	When was the debt incurred?	16							
Saint Louis, MO 63146-7260 Number Street City State Zlp Code	As of the date you file, the claim	ie. Chock all that apply							
Who incurred the debt? Check one.	As of the date you me, the claim	s. Check all that apply							
■ Debtor 1 only	☐ Contingent								
Debtor 2 only	☐ Unliquidated								
Debtor 1 and Debtor 2 only	☐ Disputed	<u> </u>							
At least one of the debtors and another		Type of NONPRIORITY unsecured claim:							
☐ Check if this claim is for a community	☐ Student loans								
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	☐ Obligations arising out of a separation agreement or divorce that you did not							
■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts							
☐ Yes	Other Specify Medical								
_ 103	Other. Specify								

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 **Jeanette Phipps**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Tota	I Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total				-	_
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	3,500.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	3,500.00
				Tota	I Claim
	6f.	Student loans	6f.	\$	3,500.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6.0	\$	0.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$	
	6i.		6i.	Φ	0.00
	OI.	Other. Add all other nonpriority unsecured claims. Write that amount here.	UI.	\$	70,690.00
	c:	Total Namericaity, Add lines Of through Ci	c:	•	74.400.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	74,190.00

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			111 FAUE 33 OLOO								
Fill in this information to identify your case:											
Debtor 1	Jeanette Phipps										
	First Name	Middle Name	Last Name								
Debtor 2											
(Spouse if, filing)	First Name	Middle Name	Last Name								
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS								
Case number											
()											

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
0	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	J.,		State		

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			<u> Paue 40 c</u>	11 ()()	
Fill in this	information to identify your	case:			
Debtor 1	Jeanette Phipps				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	g) First Name	Middle Name	Last Name		
United Stat	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
	, ,				
Case numb (if known)	per				☐ Check if this is an
					amended filing
Official	Form 106H				
		obtoro			40/45
<u>scnea</u>	ule H: Your Cod	eptors			12/15
ill it out, ar our name	nd number the entries in the and case number (if known)	boxes on the left. Attach . Answer every question	the Additional Page t	o this page. On the top of	ded, copy the Additional Page, any Additional Pages, write
1. Do y	ou have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No					
☐ Yes					
	nin the last 8 years, have you a, California, Idaho, Louisiana,				ates and territories include
■ No	Go to line 3.				
	. Did your spouse, former spou	use, or legal equivalent live	e with you at the time?		
in line Form 1	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed the o	ith you. List the person shown reditor on Schedule D (Official nedule E/F, or Schedule G to fill
	Column 1: Your codebtor lame, Number, Street, City, State and Zl	P Code		Column 2: The credit Check all schedules the	or to whom you owe the debt nat apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street	Ctoto	ZIP Code	_	
(City	State	ZIP Code		
22				☐ Schedule D, line	
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, line	
				☐ Schedule G, line	
1	Number Street			_	
(City	State	ZIP Code		

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Fill	in this information to identify your c	ase:								
Del	otor 1 Jeanette Ph	ipps				_				
	otor 2 puse, if filing)					_				
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLING	DIS		_				
	se number 		-					ed filing ent show	ing postpetition ch	apter
O	fficial Form 106I								Tollowing date.	
	chedule I: Your Inc	ome					MM / DD/ \	7 7 7 7		12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The describe Employment	ır spouse is not filing w	ith you, do n	ot include i	nform	natic	n about your sp	ouse. If r	nore space is nee	eded,
1.	Fill in your employment information.	Debtor 1					Debtor :	2 or non-	filing spouse	
	If you have more than one job,	Employment status	■ Employ	■ Employed			■ Empl	oyed		
	attach a separate page with information about additional	Linployment status	☐ Not employed			☐ Not e	mployed			
	employers.	Occupation	Personal	Banker			Safety	Officer		
	Include part-time, seasonal, or self-employed work.	Employer's name	Bank of America				СТА	CTA		
	Occupation may include student or homemaker, if it applies.	Employer's address		Lagrange t, IL 60423				567 W. Lake Street Chiago, IL		
		How long employed t	here? _	1 year				year		_
Pai	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have notl	hing to repor	t for a	ıny li	ine, write \$0 in the	space. I	nclude your non-fil	ing
	u or your non-filing spouse have mee space, attach a separate sheet to		ombine the in	formation for	all er	mplc	yers for that perso	on on the	lines below. If you	need
							For Debtor 1		ebtor 2 or iling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,				2.	\$	3,405.00	\$	6,039.00	
3	Estimate and list monthly overt	ime nav			3	2 +	0.00	4 \$	0.00	

3,405.00

6,039.00

Calculate gross Income. Add line 2 + line 3.

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Deb	otor 1	Jeanette Phipps	-	C	ase	number (if known)	_					
					For	Debtor 1		For Deb				
	Сор	y line 4 here	4.		\$	3,405.00	_	\$		39.00	_	
5.	List	all payroll deductions:										
٥.	5a.	Tax, Medicare, and Social Security deductions	5a	1	\$	614.00		\$	ç	41.00		
	5b.	Mandatory contributions for retirement plans	5b		<u> </u>	0.00		\$		0.00	_	
	5c.	Voluntary contributions for retirement plans	5c		\$ _	101.00		\$		58.00	-	
	5d.	Required repayments of retirement fund loans	5d		÷—	0.00		\$		0.00	_	
	5e.	Insurance	5e	١.	\$	39.00		\$		0.00	_	
	5f.	Domestic support obligations	5f.		\$	0.00		\$		0.00	=	
	5g.	Union dues	5g	١.	\$_	0.00		\$		0.00	_	
	5h.	Other deductions. Specify: Garnishment	5h	.+	\$	0.00	+	\$	8	42.00		
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	;	\$_	754.00		\$	1,9	41.00	_	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	:	\$	2,651.00		\$	4,0	98.00	_	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	90		Ф.	4 205 00		œ.		0.00	-	
	8b.	monthly net income. Interest and dividends	8a 8b		$_{\$}^{\$}-$	1,295.00 0.00		\$		0.00	_	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$	0.00		\$		0.00	_	
	8d.	Unemployment compensation	8d	l.	\$	0.00		\$		0.00	_	
	8e.	Social Security	8e	٠.	\$	0.00		\$		0.00		
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	e 8f. 8g		\$ \$	0.00		\$ 		0.00	_	
	8h.	Other monthly income. Specify:	8h	.+	\$	0.00	+	\$		0.00	_	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		1,295.00		\$		0.0	0	
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		3,946.00 + \$		4,098.	00	_ &	8.044.0	10
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		3,940.00	_	4,030.	00	$\neg ^{\vee} -$	0,044.0	,,
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your refriends or relatives. not include any amounts already included in lines 2-10 or amounts that are not ecify:	depe		,		,	I in <i>Sche</i>	dule		0.0	00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						f it	12.	\$	8,044.0)0
13.		ou expect an increase or decrease within the year after you file this form	?							Combii monthl	ned y income	3
		No.										_

Official Form 106I Schedule I: Your Income page 2

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Fill	in this informa	tion to identify yo	our case:			l			
	otor 1					Ch	eck if th	nie ie:	
		Jeanette Phi	pps					mended filing	
	otor 2								ving postpetition chapter the following date:
(Spo	ouse, if filing)						13 67	cpenses as or	the following date.
Unit	ed States Bankr	uptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM /	DD / YYYY	
1	e number								
(If k	nown)								
O	fficial Fo	rm 106J				-			
		J: Your l	Exper	ises					12/1
Be info nur	as complete a ormation. If m mber (if know	and accurate as ore space is ne n). Answer ever	possible. eded, atta ry question	If two married people ar ch another sheet to this					
Par 1.	t 1: Descr Is this a joir	ibe Your House nt case?	hold						
	■ No. Go to								
	_	s Debtor 2 live i	in a separ	ate household?					
	□N	0							
	□ Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of D	ebtor 2.		
2.	Do you have	e dependents?	□ No						
	Do not list Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor			ependent's ge	Does dependent live with you?
	Do not state	the							□ No
	dependents	names.			Dependent		6		Yes
					Dependent		1	8	□ No ■ Yes
					Dependent				■ Yes □ No
					Dependent		1	8	■ Yes
									□ No
_	_								☐ Yes
3.	expenses of	enses include f people other tl d your depende	han 🦳	No Yes					
Est	imate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp					
the	lude expense value of sucl ficial Form 10	n assistance an	non-cash g d have inc	government assistance i luded it on <i>Schedule I:</i> \	f you know /our Income			Your expe	enses
4.		or home owners and any rent for the		ses for your residence. I r lot.	nclude first mortgag	e 4.	\$		1,125.00
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a.	\$		0.00
		rty, homeowner's				4b.			0.00
				ipkeep expenses		4c.			250.00
5		owner's associat		dominium dues our residence, such as ho	me equity loans	4d. 5	\$ \$		0.00

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btor 1	Jeanette Phipps	Case num	ber (if known)	
Utiliti	es:			
6a.	Electricity, heat, natural gas	6a.	\$	225.00
	Water, sewer, garbage collection	6b.	·	171.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		400.00
6d.	Other. Specify:	6d.		0.00
	and housekeeping supplies	7.		850.00
	care and children's education costs	8.	\$	
			·	1,034.00
	ing, laundry, and dry cleaning	9.	\$	250.00
	onal care products and services	10.	·	100.00
	al and dental expenses	11.	\$	100.00
	portation. Include gas, maintenance, bus or train fare.	12.	¢	851.00
	t include car payments.		·	
	tainment, clubs, recreation, newspapers, magazines, and books	13.	·	100.00
	table contributions and religious donations	14.	\$	0.00
. Insur				
	t include insurance deducted from your pay or included in lines 4 or 20.	15-	¢	
	Life insurance	15a.		0.00
	Health insurance	15b.		0.00
15c.	Vehicle insurance	15c.	·	201.00
15d.	Other insurance. Specify:	15d.	\$	0.00
	5. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Speci	fy:	16.	\$	0.00
. Instal	Iment or lease payments:			
17a.	Car payments for Vehicle 1	17a.	\$	378.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify: Husbands Motorcycle	17c.	\$	412.00
	Other. Specify: Husbands Car	17d.	\$	602.00
	Service Finance Company		\$	98.00
Your	payments of alimony, maintenance, and support that you did not report as			30.00
	cted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).		\$	0.00
	payments you make to support others who do not live with you.	•	\$	0.00
Speci		19.	<u> </u>	0.00
	real property expenses not included in lines 4 or 5 of this form or on Sch		ur Income	
	Mortgages on other property	20a.		890.00
	Real estate taxes	20b.		0.00
		20b.	·	
	Property, homeowner's, or renter's insurance			0.00
	Maintenance, repair, and upkeep expenses	20d.	·	229.00
	Homeowner's association or condominium dues	20e.	·	0.00
Other	: Specify: Husband's Credit Union One Personal Loan	21.		288.00
Calcu	late your monthly expenses			
	Add lines 4 through 21.		\$	8,554.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	0,004.00
			·	0 == 1 00
22c. /	add line 22a and 22b. The result is your monthly expenses.		\$	8,554.00
Calcı	late your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	8.044.00
	Copy your monthly expenses from line 22c above.	23b.		8,554.00
200.	SSET TOWN WITH SAPOROSO HOLL MILE ZEO GROVE.	200.		0,334.00
23c.	Subtract your monthly expenses from your monthly income.			
_50.	The result is your <i>monthly net income</i> .	23c.	\$	-510.00
	ou expect an increase or decrease in your expenses within the year after y			e or decrease because of
For ex modifie	ample, do you expect to finish paying for your car loan within the year or do you expect you cation to the terms of your mortgage?	ui mongage į	sayment to mercast	
For ex	cation to the terms of your mortgage?	ur mongage į	sayment to morease	

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Fill in this inform	nation to identify your o	case:			
Debtor 1	Jeanette Phipps				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number(if known)					☐ Check if this is an amended filing
Official Forn	n 106Dec				
Declarat	ion About a	n Individual	Debtor's Scl	hedules	12/15
You must file this obtaining money years, or both. 18	s form whenever you fil	e bankruptcy schedules connection with a bank		Making a false state	ement, concealing property, or 00, or imprisonment for up to 20
Did you pay	y or agree to pay some	one who is NOT an attori	ney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes. N	lame of person				kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
	ity of perjury, I declare to true and correct.	that I have read the sumi	mary and schedules filed	l with this declaration	on and
X /s/ Jear	nette Phipps		x		

Signature of Debtor 2

Date

Jeanette Phipps

Signature of Debtor 1

Date **October 13, 2016**

_						
FIII	in this inform	nation to identify you	r case:			
Del	otor 1	Jeanette Phipps		Leaf Name		
De	otor 2	First Name	Middle Name	Last Name		
	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Bar	kruptcy Court for the:	NORTHERN DISTRICT O	OF ILLINOIS		
Ca	se number					
	nown)				_	theck if this is an mended filing
	ficial Fo				_	
St	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/16
					equally responsible for sup	
). Answer every que			, p. g, ,	
Pai	t 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	_					
	MarriedNot mar	ried				
2.	During the la	ıst 3 vears. have vou	lived anywhere other than	where vou live now?		
	_		,	, , , , , , , , , , , , , , , , , , , ,		
	■ No	t all of the places you l	ived in the last 2 years. Do no	at include where you live now	,	
	LI TES. LIS	all of the places you i	ived in the last 3 years. Do no	of include where you live now		
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3.	Within the la	st 8 years, did you ey	ver live with a spouse or led	ual equivalent in a commun	ity property state or territory	1? (Community property
stat					co, Texas, Washington and W	
	■ No					
	_	ke sure you fill out Sch	nedule H: Your Codebtors (Of	ficial Form 106H).		
Pai	t 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No					
		in the details.				
	— 100.1 III	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
the date you tiled for hankruntey.			■ Wages, commissions, bonuses, tips	\$29,717.00	■ Wages, commissions, bonuses, tips	\$55,747.00
			☐ Operating a business		☐ Operating a business	

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Page 47 of 66 Case number (if known) Debtor 1 **Jeanette Phipps**

				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	or last calen anuary 1 to		31, 2015)	■ Wages, commissions, bonuses, tips	\$26,677.00	☐ Wages, commissions, bonuses, tips	
				☐ Operating a business		☐ Operating a business	
	or the calend anuary 1 to			■ Wages, commissions, bonuses, tips	\$29,886.00	☐ Wages, commissions, bonuses, tips	
				☐ Operating a business		☐ Operating a business	
	and other winnings. I List each s	public benef f you are fili	it payments; ng a joint cas ne gross inco	pensions; rental income; inte e and you have income that		•	
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
	om January e date you f		nt year until	Rental Income	\$11,655.00		
Pa 6.		Debtor 1's Neither De individual p	or Debtor 2' btor 1 nor D	personal, family, or househo	r debts? umer debts. Consumer debts	are defined in 11 U.S.C. § 10	1(8) as "incurred by an
			-		id you pay any creditor a total	or \$6,425" or more?	
			Go to line 7	•	'-l - (-(-l - (Φ0 405*		ha tatal ama
		Yes	paid that cre not include	editor. Do not include paymer payments to an attorney for t	nts for domestic support obligation in the same of the support of the same of	n one or more payments and the ations, such as child support a or after the date of adjustment	nd alimony. Also, do
		Subject t	o aujustin e nt	on -70 1/ 13 and every 3 year	s and that for cases filed off	or allor the date of adjustifierit	•
	Yes.			r both have primarily consure you filed for bankruptcy, d	umer debts. id you pay any creditor a total	of \$600 or more?	
		□ No.	Go to line 7				
		■ Yes	List below e include pay	ach creditor to whom you pa	·	the total amount you paid that ort and alimony. Also, do not i	

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Debtor 1 **Jeanette Phipps**

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this p	ayment for
	Chase Mtg 10790 Rancho Bernardo Rd San Diego, CA 92127	August, September, October 2016	\$3,375.00	\$154,586.00	■ Mortgag □ Car □ Credit C □ Loan Re □ Supplier □ Other	ard payment s or vendors
	TD Auto Finance PO Box 9223 Farmington, MI 48333	August, September, October	\$1,140.00	\$23,299.00	☐ Mortgag ■ Car ☐ Credit C ☐ Loan Re ☐ Supplier ☐ Other_	ard payment s or vendors
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. No	artners; relatives of any ger control, or owner of 20% of	neral partners; partners partners or more of their votin	erships of which y g securities; and	ou are a gener any managing a	al partner; corporations agent, including one for
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider		ments or transfer a	any property on	account of a d	lebt that benefited an
	Insider's Name and Address	Dates of payment	Total amount	Amount you		this payment
			paid	still owe	Include cred	ditor's name
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title Case number			on suits, paternity		rt or custody
40					!-bddb	1! 1!!- 10
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11.		erty repossessed, 1	roreciosed, garn	isnea, attache	a, seizea, or levied?
	Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date	е	Value of the property
		Explain what happene	d			property

Case 16-32647 Doc 1 Filed 10/13/16 Entered 10/13/16 11:07:27 Page 49 of 66 Document Debtor 1 Case number (if known) Jeanette Phipps 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- - Nο

Yes. Fill in the details.

Describe the property you lost and how the loss occurred

Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.

Date of your loss

Value of property lost

Part 7: List Certain Payments or Transfers

Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

Nο

Suite 205

Yes. Fill in the details. Person Who Was Paid

123 West Madison Street

Chicago, IL 60602 joe@bizardoylelaw.com

Address Email or website address Person Who Made the Payment, if Not You Bizar & Doyle, LLC

Attorney Fees

Description and value of any property transferred

Date payment or transfer was made

Amount of payment

2016

\$850.00

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Debtor 1 Jeanette Phipps

Address Stransferred Address Stransferred Address Addr	17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you No	rs or to make payments			r transfer any prope	rty to anyone who
Address transferred made		☐ Yes. Fill in the details.					
transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the graiting of a security interest or mortgage on your property). D No Yes, Fill in the details. Person Who Received Transfer Address Description and value of property transferred Describe any property or payments received or debts paid in exchange				alue of any prop	erty	or transfer was	Amount of payment
Person'ts relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you beneficiary? (These are often called asset-protection devices.) Name of trust Description and value of the property transferred Date Transmade Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 10 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokenses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to It? Address (Number, Street, City, State and ZIP Code) Who else has or had access Describe the contents Do you have it? Address (Number, Street, City, State and ZIP Code) No Describe the contents Do you have it? Describe the contents Do you have it?	18.	transferred in the ordinary course of your bu Include both outright transfers and transfers ma include gifts and transfers that you have already No	usiness or financial affa ide as security (such as t	t irs? he granting of a se			
Address Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transmade Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brohouses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access Describe the contents Do you have it? No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access Describe the contents Do you have it? No Yes. Fill in the details.			Description and v	alue of	Describe a	iny property or	Date transfer was
19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transmade Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brohouses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Or Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Or Yes. Fill in the details. No Describe the contents Do you have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Describe the contents Do you have it?		Address			payments	received or debts	
■ No		Terson's relationship to you					
### List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brohouses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access Describe the contents Do you have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access Describe the contents Do you have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)	19.	beneficiary? (These are often called asset-prod No		y property to a so	elf-settled tru	st or similar device	of which you are a
### List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brohouses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access Describe the contents Do you have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access Describe the contents Do you have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)		Name of trust	Description and v	alue of the prope	erty transferre	2 4	Date Transfer was
20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, bronouses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution 1 year before you filed for bankruptcy, any safe deposit box or other depository for sec cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access Describe the contents Do you have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State Contents) Do you have it?		Name of trust	Description and v	ande of the prope	ity transient	,u	
sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brochouses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Last 4 digits of account or instrument closed, sold, moved, or transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for sec cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access Describe the contents Do you Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)	Par	8: List of Certain Financial Accounts, Ins	truments, Safe Deposit	Boxes, and Stor	age Units		
Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Last 4 digits of account or instrument closed, sold, moved, or transferred Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for sec cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City,	sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; sh houses, pension funds, cooperatives, associations, and other financial institutions. No						
Address (Number, Street, City, State and ZIP account number instrument closed, sold, moved, or transferred before closed, sold, moved, or transferred closed, cl			Loot A digito of	Tyme of coccum	t av Dat	a account was	l oot holonee
No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Describe the contents Do you have it? Who else has or had access to it? Describe the contents Do you have it?		Address (Number, Street, City, State and ZIP		• •	clo: mo	sed, sold, ved, or	Last balance before closing or transfer
 Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) 	21.		ear before you filed for	bankruptcy, any	safe deposit	box or other depos	itory for securities,
Address (Number, Street, City, State and ZIP Code)		_					
■ No □ Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, Address (Number, Street, City,			Address (Number, S		escribe the o	contents	Do you still have it?
Address (Number, Street, City, State and ZIP Code) to it? Address (Number, Street, City,	22.	■ No		home within 1 ye	ear before yo	u filed for bankrupto	cy?
		·	to it? Address (Number, S	-	escribe the o	contents	Do you still have it?

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Debtor 1 Jeanette Phipps

Part 9:	Identify Property	You Hold or	Control for	Someone Else
---------	-------------------	-------------	-------------	--------------

23.	Do you hold or control any property that someone for someone.	ne else owns? Include any prope	rty you borrowed from, are storing for	r, or hold in trust
	□ No			
	Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
	Ronnie Phipps 18811 Royal Rd Homewood, IL 60430	Chase Bank	Checking/Savings account	\$318.00
	Jatyshia Bennett 18811 Royal Rd Homewood, IL 60430	Chase Bank	Custodial Account	\$2,180.00
	Dependent Phipps 18811 Royal Rd Homewood, IL 60430	Chase Bank	Custodial Account	\$215.00
Par	t 10: Give Details About Environmental Informa	ition		
or	the purpose of Part 10, the following definitions a	apply:		
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal s		law, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		s waste, hazardous substance, toxic	substance,
₹ер	ort all notices, releases, and proceedings that yo	u know about, regardless of whe	n they occurred.	
24.	Has any governmental unit notified you that you	may be liable or potentially liable	e under or in violation of an environm	ental law?
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	trative proceeding under any env	ironmental law? Include settlements	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case

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Case number (if known) Document Debtor 1 **Jeanette Phipps**

Pa	rt 11	Give Details About Your Business or	Connections to Any Business	
27.	Wi	thin 4 years before you filed for bankrupt	cy did you own a business or have any of	the following connections to any business?
		<u> </u>	n a trade, profession, or other activity, eith	•
		_	any (LLC) or limited liability partnership (L	·
		☐ A partner in a partnership		,
		☐ An officer, director, or managing ex	ecutive of a corporation	
		☐ An owner of at least 5% of the voting	•	
	_	No. None of the above applies. Go to F		
	_	•		
		usiness Name	in the details below for each business. Describe the nature of the business	Employer Identification number
		ddress umber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN.
	(ambon, oncon, only, online and all occop	Name of accountant of bookkeeper	Dates business existed
28.		thin 2 years before you filed for bankrupt titutions, creditors, or other parties.	cy, did you give a financial statement to ar	nyone about your business? Include all financial
		No		
		Yes. Fill in the details below.		
	A	ame ddress umber, Street, City, State and ZIP Code)	Date Issued	
Pa	rt 12	Sign Below		
are with 18 to /s/ Je	truen a k J.S. Jea ane	and correct. I understand that making a pankruptcy case can result in fines up to C. §§ 152, 1341, 1519, and 3571. Inette Phipps tte Phipps		declare under penalty of perjury that the answers btaining money or property by fraud in connection irs, or both.
Sig	jnat	ure of Debtor 1		
Da	te	October 13, 2016	Date	
Did ■ 1	No	attach additional pages to Your Stateme	nt of Financial Affairs for Individuals Filing	g for Bankruptcy (Official Form 107)?
Did ■ 1	-	pay or agree to pay someone who is not	an attorney to help you fill out bankruptcy	y forms?
	res.	Name of Person Attach the Bankru	ptcy Petition Preparer's Notice, Declaration, a	and Signature (Official Form 119).

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Debtor 1	Jeanette Phipps			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Backers Case number	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
f known)				 Check if this is a mended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
	Creditor's Chase Mtg	☐ Surrender the property.	□No
	name:	☐ Retain the property and redeem it.	
	Description of 18811 Royal Rd Homewood, IL	Retain the property and enter into a	Yes
	property 60430 Cook County	Reaffirmation Agreement.	
	securing debt:	☐ Retain the property and [explain]:	
	Creditor's Pnc Mortgage	□ O constant to a constant	_
	Creditor's Pnc Mortgage name:	☐ Surrender the property. ☐ Retain the property and redeem it.	No
		Retain the property and enter into a	□Yes
	Description of 18004 Chantily Lane Hazel	Reaffirmation Agreement.	00
	property Crest, IL 60429 Cook County	☐ Retain the property and [explain]:	
	securing debt:		
_			
	Creditor's Santander Consumer Usa	Surrender the property.	■ No
	name:	☐ Retain the property and redeem it.	_
	Description of 2014 Builds Leavener 48 000	☐ Retain the property and enter into a	☐ Yes
	Description of property 2011 Buick Lacrosse 48,000 miles	Reaffirmation Agreement.	
	Value based on NADA	☐ Retain the property and [explain]:	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Jeanette Phipps	Case number (if know	n)
securing debt:		_
Creditor's Service Finance Company name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property securing debt: Windows/Doors - Lien held by Service Finance Company	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes
Creditor's Td Auto Finance name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property securing debt: 2016 Kia Sportage 3,500 miles Value based on NADA	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes
Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in the information below. Do not list real estate leases. U You may assume an unexpired personal property lease if	d in Schedule G: Executory Contracts and Unexpinexpired leases are leases that are still in effect; t	he lease period has not yet ended.
Describe your unexpired personal property leases		Will the lease be assumed?
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Part 3: Sign Below		

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Del	btor 1	Jeanette Phipps	Case number (if known)
X	/s/ Jea	nette Phipps	X
	Jeane	tte Phipps	Signature of Debtor 2
	Signatu	ire of Debtor 1	
	Date	October 13, 2016	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-32647 Doc 1 Filed 10/13/16 Entered 10/13/16 11:07:27 Desc Main Document Page 60 of 66

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Jeanette Phipps		Case No		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COM	PENSATION OF ATTOR	NEY FOR D	EBTOR(S)	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2 compensation paid to me within one year before the per rendered on behalf of the debtor(s) in contemplate	filing of the petition in bankruptcy,	or agreed to be pai	d to me, for services	
	For legal services, I have agreed to accept		<u> </u>	850.00	
	Prior to the filing of this statement I have received	ved	\$	850.00	
				0.00	
2. 7	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. 7	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed c	compensation with any other person	unless they are men	mbers and associates	of my law firm.
1	☐ I have agreed to share the above-disclosed comp copy of the agreement, together with a list of the				/ law firm. A
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
t c	a. Analysis of the debtor's financial situation, and r b. Preparation and filing of any petition, schedules, c. Representation of the debtor at the meeting of cr d. [Other provisions as needed] Negotiations with secured creditors reaffirmation agreements and applic 522(f)(2)(A) for avoidance of liens or	statement of affairs and plan which reditors and confirmation hearing, an to reduce to market value; executions as needed; preparation	may be required; d any adjourned he mption planning	earings thereof;	d filing of
6. I	By agreement with the debtor(s), the above-disclose Representation of the debtors in any proceeding.			ces or any other a	adversary
		CERTIFICATION			
	certify that the foregoing is a complete statement of ankruptcy proceeding.	of any agreement or arrangement for	payment to me for	representation of the	e debtor(s) in
0	ctober 13, 2016	/s/ Joseph R. Doy	le		
	ate	Joseph R. Doyle of Signature of Attorne Bizar & Doyle, LL 123 West Madison Suite 205 Chicago, IL 60602 312-427-3100 Fa: joe@bizardoylela	5279065 C n Street k: 312-427-5400		

Name of law firm

Case BIZAR & DOY	LE. LLC BANKRUPTC	CY CONTRACT"
SF. C. COLOR ST. Co. S	Bank Account Setoff (Y/N) License suspended (Y/N) Motion to avoid lien (Y/N)	Taxes Student Loans #3,000 Child Support NSF Parking Tickets Govt. Debt Other TOTAL Garnishment (Y/N) IRS Determination (Y/N) Judgment lien motion (Y/N)
CHE CHAPTER 7 WILL NOT BE FILE	S SSO (III ES 350 PA VARIE (LERI (V) QUI NTI / CASHIER'S CHECK POK \$33580 (XYABI III UN'EL ATTORNOS (TEES ARE PAID IN	FIGURE BIZAR & BOYLE (LC
CHAPTER 13 - debt consolidation p	A STATE OF THE PROPERTY OF THE	
CHAPTER 13 ATTORNEY'S FEE Today you paid as \$retained Your PAYMENT PLAN: \$ **FILING FEE**(MONEY ORDER OR CASH	hs, paying an estimated %, to t Your balance is S before , plus \$310.9 IER'S CHECK FOX PAYABLE TO THE BIZAR & will be paid to us through your hapte to produce me the fellow of \$175.00 plus The partners with the fellow of \$175.00 plus The partners with the fellow of \$175.00 plus The partners with the fellow of \$175.00 plus The partners of the fellow of \$175.00 plus the second exp	og fee not included) O for the filing fee. MAYER, LLC) C 3 Plan payments to the Trustee. Tage 11 payments to the Trustee.
to fully disclose all financial information to BIZAR & DOYL that it is a Federal crime to omit a creditor or other informat the last payment date. Attorney's advice to client is based or related to changes in the law that affect client's ability to qua any client delay should the law change. Pay in full immedia give client. 3) STATE LAW PROCEEDINGS- Client me matters and will not represent any bankruptcy client in ANY show cause or any other civil or criminal lawsuits. Client in chooses to terminate BIZAR & DOYLE, LLC's boothy fate is \$2 DOYLE, LLC as client attorneys. After receiving written unsanced attorneys fees paid to date. 3) COLLECTIONS-ICLIENT is liable for all attorneys fees and costs incurred to convitten request, certified mail return receipt requested COUNSELING/FINANCIAL MANAGEMENT - Every prior to filing a bankruptcy. Each client must take a finance classes at: USE WWW ACCESSEK ORG. Attorney of fees for Amending Benkruptcy Schedules: \$230 a men omitted. There is no charge to amend for a change of addresis filed. Chini agrees to call BIZAR & DOYLE, LLC three BIZAR & DOYLE, LLC still has to appear at the hearing discharge; BIZAR & DOYLE, LLC's fee for negotiating discharge issue is \$275 per hour, ten hours to be paid in adclient delays in paying the fees, returning the petition or in documents of information. Avoiding Liens/ Redemptions-against real estate, (\$550), avoiding non-purchas paid prior to BIZAR & DOYLE, LLC drafting such motion the lien will survive the bankruptcy. Client acknowledges the BIZAR & DOYLE, LTD for any returned checks not hot attorney may work on different aspects of client's case. expense, to work on this matter and divide fees with them	(COST IS SEPARATE FROM ATTORNEY AN LE, LLC. Client must disclose all assets and all debts regard tion from a bankruptcy petition. 2) TIMELY PAYMENT/ in current applicable Local, State and Federal laws. Client a lifty for bankruptcy relief or to discharge debts within a bank tiely so BiZAR & DOYLE, LLC can file client's case or risk ust personally appear at any and all state court proceedings, state law matter, including, but not limited to, divorce proces is advised to attend all state court proceedings, unless specific theorems of the proceedings and the proceedings are refunded to a refurt the proceeding and the proceedings and the proceedings are refunded to a refurt to BIZAR & DOYLE, LLC will take approximately of the debt, including court costs of RESCISSIONS—of the BIZAR & DOYLE, LLC is unable to collect its fees pursually the proceeding from an "approved not client must receive credit counseling from an "approved not client and client's petition once the case is filed to add additional and client's petition once the case is filed to add additional action of the proceeding from the safet of the providing information to BIZAR & DOYLE, LLC reserves the right providing information to BIZAR & DOYLE, LLC, includit Client agrees that the above quoted fee does not include the emoney security interests (\$375), or redemptions and runder stands and agrees that if client does not pay that there is a limited time to bring such motions, Motion to narkruptcy case for any reason once the case is discharged. In nored by client's bank for any reason, 9) GROUP PRACT Client authorizes BIZAR & DOYLE, LLC to hire co-cou	less of client's intentions to repay such debts and understands "LAW CHANGES - Client agrees to pay fees in full prior to grees to hold BIZAR & DOYLE, LLC harmless for damages truptcy case. BIZAR & DOYLE, LLC harmless for damages truptcy case. BIZAR & DOYLE, LLC does not represent client in these tedings, contempt hearings, citation to discover assets, rules to be BIZAR & DOYLE, LLC does not represent client in these tedings, contempt hearings, citation to discover assets, rules to discally advised otherwise in writing. 4) REFUNDS-If client and of uncarned fees, Client must submit a written request on it is entitled to in the event that client discharges BIZAR & 45 days to do an accounting and issue a refund check of any until to this contract, we will refer your account to collections the prior to the bar date for rescissions. 7) CREDIT approfit budget and credit counseling agency within 180 day for your Section 341 meeting of creditors hearing. Take the all court costs and filing fees, client agrees to pay additional creditors and/or to list additional assets that were previously of a §341 meeting approximately four weeks after client's case meeting date if client has not received notice of the meeting for each missed count date/hearing. Adversary objections to of settlement. BIZAR & DOYLE, LLC's fee for litigating to charge a minimum of \$150 for additional fees due to an gappraisals, proof of insurance, titles or any other requester following additional fees for services to avoid judgment lien so on vehicles (\$600)
()	((

Case 16-32647

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Jeanette Phipps		Case No	o	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COM	PENSATION OF ATTO	RNEY FOR I	DEBTOR(S)	
Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rende be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
	For legal services, I have agreed to accept		\$	850.00	
	Prior to the filing of this statement I have received			850.00	
				0.00	
2. T	ne source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. Т	he source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
i. I	I have not agreed to share the above-disclosed of	compensation with any other person	unless they are me	embers and associates of my law fir	
[I have agreed to share the above-disclosed com copy of the agreement, together with a list of the	pensation with a person or persons the names of the people sharing in th	who are not membe e compensation is a	ers or associates of my law firm. A ttached.	
5, I	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
a b c d	7	s, statement of affairs and plan which reditors and confirmation hearing, a s to reduce to market value; ex- cations as needed; preparation	h may be required; and any adjourned h	earings thereof;	
5. E	y agreement with the debtor(s), the above-disclose			aces or any other adversary	
	proceeding.	y dischargeability actions, jud	iciai ilen avoldai	ices of any other adversary	
- 11			iciai ilen avoldal		
I this ba		CERTIFICATION	·		
this ba	proceeding. certify that the foregoing is a complete statement of	CERTIFICATION	·		
this ba	proceeding. certify that the foregoing is a complete statement onkruptcy proceeding. ptember 16, 2016	CERTIFICATION of any agreement or arrangement for Joseph R. Doyle	payment to me fo		
this ba	proceeding. certify that the foregoing is a complete statement onkruptcy proceeding. ptember 16, 2016	CERTIFICATION of any agreement or arrangement for Joseph R. Doyle Signature of Attorn	payment to me for		
this ba	proceeding. certify that the foregoing is a complete statement onkruptcy proceeding. ptember 16, 2016	CERTIFICATION of any agreement or arrangement for Joseph R. Doyle Signature of Attorn Bizar & Doyle, L	payment to me for 62/10065		
this ba	proceeding. certify that the foregoing is a complete statement onkruptcy proceeding. ptember 16, 2016	CERTIFICATION of any agreement or arrangement for Joseph R. Doyle Signature of Attorn	payment to me for 62/10065		
this ba	proceeding. certify that the foregoing is a complete statement onkruptcy proceeding. ptember 16, 2016	Joseph R. Doyle Signature of Attorn Bizar & Doyle, L 123 West Madis Suite 205 Chicago, IL 6060	payment to me for 62/20065 ey LC on Street	r representation of the debtor(s) in	
this ba	proceeding. certify that the foregoing is a complete statement onkruptcy proceeding. ptember 16, 2016	Joseph R. Doyle Signature of Attorn Bizar & Doyle, L 123 West Madis Suite 205 Chicago, IL 6066 312-427-3100 F	2 payment to me for 6229065 Ey LC Dn Street 22 ax: 312-427-5400	r representation of the debtor(s) in	
this ba	proceeding. certify that the foregoing is a complete statement onkruptcy proceeding. ptember 16, 2016	Joseph R. Doyle Signature of Attorn Bizar & Doyle, L 123 West Madis Suite 205 Chicago, IL 6060	2 payment to me for 6229065 Ey LC Dn Street 22 ax: 312-427-5400	r representation of the debtor(s) in	

United States Bankruptcy Court Northern District of Illinois

In re	Jeanette Phipps	Debtor(s)	Case No. Chapter	7
	VEI	RIFICATION OF CREDITOR MAT	-	•
	, 22	Number of Cre		32
	The above-named Debtor(s) l (our) knowledge.	hereby verifies that the list of creditors	is true and	correct to the best of my
Date:	October 13, 2016	/s/ Jeanette Phipps Jeanette Phipps Signature of Debtor		

Barclays Bank Delaware Po Box 8803 Wilmington, DE 19899

Cap1/mnrds 26525 N Riverwoods Blvd Mettawa, IL 60045

Capital One Bank Usa N 15000 Capital One Dr Richmond, VA 23238

Chase Mtg Po Box 24696 Columbus, OH 43224

Chld/cbna Po Box 6497 Sioux Falls, SD 57117

Cmre 3075 E Imperial Hwy Ste Brea, CA 92821

Discover Fin Svcs Llc Pob 15316 Wilmington, DE 19850

Franciscan Alliance 28044 Network Place Chicago, IL 60673-1280

H.E.L.P PO Box 6408 Plymouth, MI 48170-6408

Harvard Collection 4839 N Elston Chicago, IL 60630

HRRG PO Box 8486 Pompano Beach, FL 33075-8486 IL Department of Revenue* PO BOX 64338 Chicago, IL 60664-0338

Illinois Department of Public Aid 705 N Country Fair Dr Champaign, IL 61821

Lake Anesthesia Associates PO Box 158 Flossmoor, IL 60422-2077

Mohela/dept Of Ed 633 Spirit Dr Chesterfield, MO 63005

Mrsi 2250 E Devon Des Plaines, IL 60018

Performance Foot and Ankle Center 401 East 162nd St, Ste 101 South Holland, IL 60473-2237

Pnc Mortgage Po Box 8703 Dayton, OH 45401

Radiology Imaging Consultants 75 Remittance Dr Dept 1254 Chicago, IL 60675

S Suburban Gastroenterology 17901 Governors Hwy Suite 106 Homewood, IL 60430-1146

Sameh Nabelsi MD 19624 Governors Hwy, Suite 9 Flossmoor, IL 60422-2077

Sanath Kimar MD 9445 144th Pl Orland Park, IL 60462-2543 Santander Consumer Usa Po Box 961245 Ft Worth, TX 76161

Service Finance Company PO Box 645387 Cincinnati, OH 45264

Smart EOB- Humana PO Box 14611 Lexington, KY 40512-4611

State Collection Service 2509 S Stoughton Rd Madison, WI 53716

Td Auto Finance Po Box 9223 Farmington Hills, MI 48333

The University of Chicago Physician Group PO Box 75307 Chicago, IL 60675

Trustmark Recovery Services 541 Otis Bowen Dr Munster, IN 46321

University of Chicago Medicene 15965 Collections Center Drive Chicago, IL 60693

US Acute Care Solutions PO Box 14099 Belfast, ME 04915

Vision Financial Corp PO Box 460260 Saint Louis, MO 63146-7260